



05-02-05

1652

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of: Timothy A. Bird, G. Duke Virca,
Unja Martin and Dirk M. Anderson

Docket No.: 2923-US

Serial No.: 09/980,464

Group Art Unit: 1652

Filing Date: March 19, 2002

Examiner: Maryam Monshipouri

For: NOVEL MURINE AND HUMAN KINASES

CERTIFICATE OF MAILING BY EXPRESS MAIL

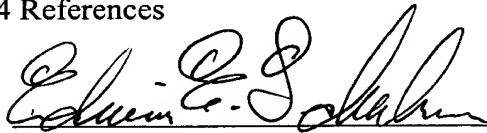
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL LABEL NUMBER: EV438677582US

I hereby certify that the following correspondence is enclosed and is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date listed below, and is addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

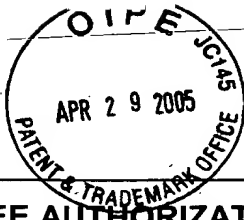
Postcard
Transmittal (1 pg + copy)
Amendment and Response (7 pgs)
Information Disclosure Statement (2 pgs)
Form PTO-1449 (1 pg)
4 References

Signed:

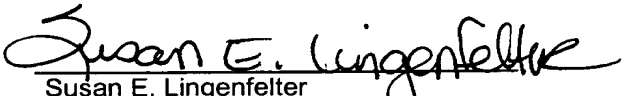

Edwin E. Scheibner

Date:

4-29-05



Express Mail No. EV438677582US
PATENT APPLICATION

FEE AUTHORIZATION / AMENDMENT TRANSMITTAL					Attorney's Docket No: 2923-US		
Serial No. 09/980,464		Filing Date March 19, 2002		Examiner Maryam Monshipouri		Group Art Unit 1652	
In Re Application of Timothy A. Bird, G. Duke Virca, Unja Martin and Dirk M. Anderson							
For NOVEL MURINE AND HUMAN KINASES							
TO THE COMMISSIONER FOR PATENTS:							
<input type="checkbox"/> Applicant(s) request(s) the following extension of time under 37 CFR 1.136(a):							
<input type="checkbox"/> One month of original due date (\$120.00)							
<input type="checkbox"/> Two months of original due date (\$450.00)							
<input type="checkbox"/> Three months of original due date (\$1,020.00)							
<input type="checkbox"/> Four months of original due date (\$1,590.00)							
<input type="checkbox"/> Five months of original due date (\$2,160.00)							
<input checked="" type="checkbox"/> A response in connection with the matter for which this extension is requested:							
<input checked="" type="checkbox"/> is filed herewith.							
<input type="checkbox"/> has been filed.							
<input type="checkbox"/> The response is the filing of a continuing application, the prior application having an express abandonment conditioned on the granting of a filing date to the continuing application.							
<input checked="" type="checkbox"/> The accompanying papers include amended claims for which no additional fee is required.							
<input type="checkbox"/> The accompanying papers include amended claims the fee for which has been calculated as follows:							
CLAIMS AS AMENDED							
(1)	(2) Claims remaining After amendment	(3)	(4) Highest number Previously paid for	(5) No. of Extra claims present	(6) Rate	(7) Additional Fee	
Total Claims	9	Minus	20 =	0	x \$50	= \$ 0.00	
Indep. Claims	2	Minus	3 =	0	x \$200	= \$ 0.00	
<input type="checkbox"/> First Appearance of a multiple dependent claim					+	\$360 = \$ 0.00	
Total Additional Fee for this Amendment						\$ 0.00	
<p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col 1. of a prior amendment or the number of claims originally filed.</p> <p><input checked="" type="checkbox"/> The following other fees are incurred by the accompanying papers.</p> <p><input checked="" type="checkbox"/> Other: <u>IDS fee under 37 CFR 1.97(c) in the amount of \$180.00</u></p> <p><input checked="" type="checkbox"/> Please charge Deposit Account No. 09-0089 in the name of Immunex Corporation in the amount of \$180.00. A duplicate copy of this petition is attached.</p> <p><input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a request therefore.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 09-0089.</p>							
Please Send Future Correspondence To:							
22932							
Immunex Corporation Law Department 1201 Amgen Court West Seattle, Washington 98119-3105 (206) 265-7000							
<div style="text-align:right"> Susan E. Lingenfelter Attorney/Agent for Applicant(s) Registration No.: 41,156 Phone: (206) 265-7340 Date: April 29, 2005</div>							